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ABSTRACT

This manual was conceived and developed on the premise that many of the problems that face individuals in a democratic society can best be resolved by concerted, community-wide action. The seminar approach to resolving urgent community issues has been pioneered by a number of municipalities throughout the State of New York. Included in the manual are the basic procedures for facilitating the dialogue necessary to the success of the seminar approach. Four models give detailed examples of how the seminars might be promoted and conducted. (CK)

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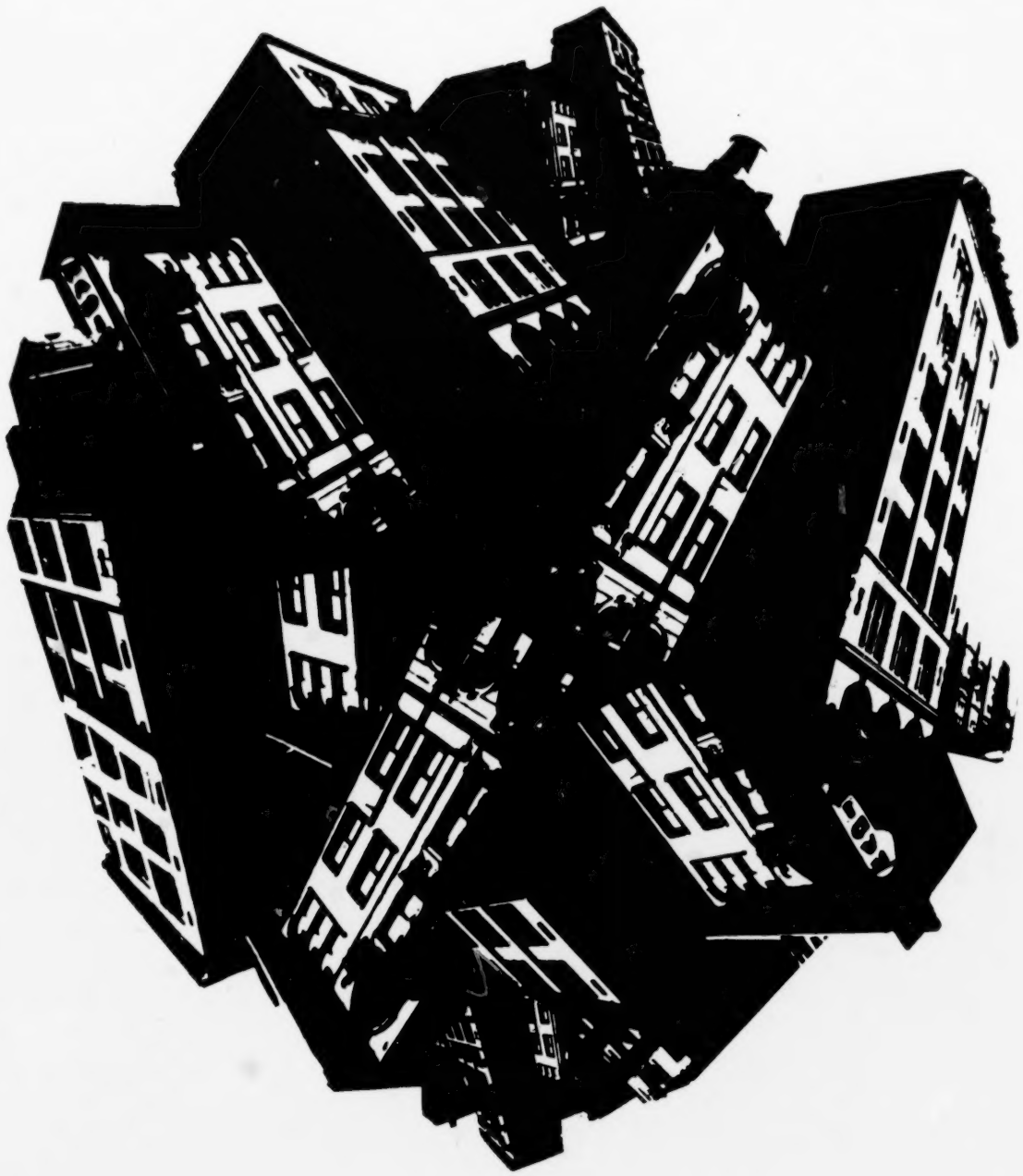

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seminars

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
Bureau of Continuing Education Curriculum Development
Albany, New York 12224
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FOREWORD

This manual was conceived and developed on the premise that many of the problems which face the individual citizens of a democratic society can best, and often only, be resolved by concerted, community-wide action. Representatives from every segment of the community must be involved in defining local problems, identifying their causes, exploring possible solutions, and effecting positive changes.

Rare is the community that is not continually plagued by issues which, unless given urgent attention, threaten the well-being of the members of that community. Currently, the widespread abuse of narcotics and drugs by teenagers has alarmed the residents of a number of school districts; the ominous mushroom of environmental decay has brought grave concern to entire municipalities; and the growing epidemic of venereal diseases has caused groups of shocked parents to seek expedient preventive programs. Racial tensions, outbreaks of vandalism, consumer fraud, and the acquisition of private land for state and Federal projects are all crises that can, with lethal swiftness, become explosive, divisive, and destructive. Yet, handled properly, they can be opportunities for the citizens of communities to work together in solving common problems and in seeking ways in which competing interests may be tolerably accommodated.

The seminar approach to resolving urgent community issues has been pioneered by a number of municipalities throughout the State of New York. In the Oceanside Public Schools, Morton Horowitz, Director of Continuing Education, has employed this technique with great success. It was therefore fortunate that he was willing to serve as a major contributor to this publication in order that other directors of continuing education might benefit from his experience.

Nicholas Alexiou, M.D., Associate Director for Preventive Services, New York State Department of Health; John Bellizi, M.D., Director of the Bureau of Narcotics, New York State Department of Health; Alan Hinman, M.D., Director of the Bureau of Epidemiology, New York State Department of Health; and Joseph D'Elia, Chief, Bureau of Health Education, New York State Education Department, reviewed portions of the manuscript and made valuable suggestions regarding its technical accuracy.

George K. Tregaskis, Associate, Bureau of Continuing Education Curriculum Development, originated the guidelines for the seminars, designed the format, and coordinated the development of the publication.

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MESSAGE TO THE DIRECTOR OF CONTINUING EDUCATION

Professionals in the field of continuing education are currently reemphasizing that one of their most essential roles is to be responsive to the immediate as well as the more long range needs of the populations which they serve. The intent of this manual is to suggest to directors of continuing education how they might fulfill that role by promoting and conducting seminars designed to help resolve urgent community issues.

Included in this manual are the basic procedures for facilitating the dialog so necessary to the success of the seminar approach. Hopefully, the dialog that is generated will narrow the communication gap between parent and child; black and white; dove and hawk; doctor and patient; merchant and consumer. With the increased understanding of what the problems are, and how they originated, the implementation of preventive or corrective action then becomes a possibility. The director of continuing education will also find in this manual specific suggestions for establishing lay committees, descriptions of various seminar activities, and pointers for leading discussion groups.

Four models provide detailed examples of how the seminars might be promoted and conducted. It needs to be stressed that *these models are provided as examples only* and that it would be remiss for a director of continuing education to attempt to replicate any of them in his school district. Certainly a director may be faced with issues similar to those cited in the models, but he must be ready to organize the seminars in his school district according to the particular needs and resources of his own community. Supplementary material for three of the more common dilemmas of the day (drug abuse, environmental decay, and venereal disease) are included as well as techniques for training moderators.

Initiated with a good public relations program and sustained by a sensitivity to impending issues, the seminars should provide the director of continuing education with the satisfying experience of offering the citizens of his community a vital and unique service.

MONROE C. NEFF, *Director*
Division of Continuing Education

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The director of continuing education who elects to use the seminar approach in resolving urgent community issues cannot and should not assume sole responsibility for the determination of the topics or the eventual implementation of the program. There is a direct ratio in terms of the number of different community representatives involved in the planning stages and the interest and number of people eventually participating in the program itself. The more diversified the advice and assistance received, in terms of geography, occupation, age, sex, and opinion, the more successful the seminars will be.

Therefore, it is suggested that the director of continuing education *first organize an advisory committee* charged with the responsibility of identifying existing community issues, and, if possible, even anticipating issues that may arise in the near future. This advisory committee should be representative of the total community, and should, depending on the population of the community, have among its membership at least one of each of the following individuals:

- law enforcement officer
- clergyman
- student
- school administrator, teacher, guidance counselor
- physician or health officer
- parent
- businessman
- elected governing official
- representative from service organizations such as Red Feather, Salvation Army, Lions Club
- senior citizen
- attorney
- director of recreation or director of youth
- industrial executive
- director of social welfare
- representative from poverty groups
- representative from Narcotics Addiction Control Commission and Narcotics Control Councils

In addition, minority groups of both sexes and varying generations should be represented among the members of the advisory committee. When possible, encourage the group or organization involved to elect their own representative.

The continuing education advisory committee which already exists in most of the communities of New York State serves the purpose of involving representatives from all sectors of the local population. In such instances, perhaps this existing committee will elect to establish a "seminars advisory subcommittee" to advise on planning this aspect of the continuing education program. Therefore, the director of continuing education must decide whether the following suggestions are applicable to either the regular advisory committee or the subcommittee.

After the advisory committee has been established, a permanent meeting date should be set. This will facilitate a continuity of purpose and will assist in molding a cohesive working unit. Any appearance of using this group in name only should be avoided. If the committee is to continue to serve a meaningful function, then the decisions made and recommendations forthcoming must be acted upon. Nothing is more frustrating to a busy, well-intentioned person than to invest hours in a committee meeting and have nothing to show for his efforts.

One of the most important functions of the advisory committee lies in the area of issue identification. What are the issues about which the community is concerned? How many people are affected by this problem? There are many avenues open to the group that is willing to undertake the task of pinpointing the concerns of the community. Some of these problems are obvious and easily recognized; other problems, before they can be defined, require considerable exploration beyond their symptoms of unrest and tension.

The advisory committee might seek to identify needs by:

- cultivating coordinators or liaison people in industry, business, labor, and community organizations who watch for opportunities for education to perform a service
- receiving requests from business, industrial, labor, and community groups and individuals
- maintaining extensive personal acquaintances with community leaders and groups
- examining census and similar data
- making systematic surveys of the business, civic, and industrial life of the community
- examining published surveys of other communities
- acting on a hunch
- being sensitive to the civic, personal, and social problems of people which might be alleviated by a seminar approach

- checking on known interests of people
- utilizing checklists and other interest finders
- consulting the editors of the local news media

The public should be apprised of the function of the advisory committee and be encouraged to discuss with the members of the committee ideas they may have regarding community issues. Second, the director of continuing education needs to *establish priorities* for the identified needs based upon the recommendations of the advisory committee. Priorities may be determined by:

- a consideration of the number of people affected by the issue
- the urgency of the issue
- the severity of the consequences if the issue is not resolved
- whether or not any other group is attempting to resolve the issue and the extent to which they may be willing to join forces with those participating in the continuing education seminars

The advisory committee, working in conjunction with the director, must have the final say in selecting topics for the seminars.

After a topic has been agreed upon, a program steering committee, composed of disinterested but informed citizens, *should be selected.* A coordinator should be designated to handle all administrative details. In large school districts, it may be advisable for the director of continuing education to request that his assistant or a competent lay person serve as program coordinator. However, because of budgetary considerations, the director of continuing education may have to assume the responsibility of chairing the steering committee and providing all of the necessary facilities and secretarial work.

Once an issue is assigned to a steering committee, the committee should:

- *determine factions involved,* personalities involved, duration and severity of conflict or problem, and what groups of individuals may already be working on or are at least organized to work on such problems
- *determine the extent to which other communities have been faced with a similar issue* and the means by which they have attempted to resolve it
- *establish goals for seminars.* Examples regarding a local epidemic of vandalism would be:
  - to obtain an accurate account of the incidence of vandalism in the community - also who is vandalized, how, when
  - to obtain an accurate account of the efforts of law enforcement agencies to curb vandalism

  - to determine any trends of apprehended offenders
  - to learn about the factors which contribute to vandalism
  - to review effective measures taken by other communities to curb vandalism
  - to formulate recommendations to be presented to governing bodies, schools, or service organizations
- *determine the resources available* which might help in resolving the issue. The following sources might be contacted:
  - business and industry
  - labor unions
  - churches
  - State agencies of education, employment, health, law enforcement, public welfare, and narcotics control
  - community action programs
  - Headstart (parent education)
  - libraries
  - directors of vocational education
  - U.S. census experts
  - research departments of local schools and universities
  - sociology departments of universities and other institutions offering adult education programs (YMCA, League of Women Voters, junior college, evening college)
  - young adult groups
  - senior citizen organizations
  - service clubs and other volunteer associations
  - nonchartered local groups with a common identity (minorities, street gangs, tenants of a housing complex)
- *determine the time and dates and the agendum of the seminars* including: guest speakers, moderators, panels, and A-V aids
- *establish ground rules for dialog*

At the first meeting of the committee, the goals and purposes of the program must be clearly established. These goals and projected results must be referred to constantly during the planning stages if a continuity of purpose is to be maintained. Do not allow members of the committee to supply tangential aspects to the program. This will dilute the desired effects.

The director of continuing education, or program director, should *then arrange for publicity through*:

- brochures describing the local continuing education program
- flyers
- mail-outs
- posters
- newspaper releases
- TV and radio announcements

In addition, the director should *preside over seminars* and, with the steering committee, *evaluate their effectiveness* with a view toward making any necessary changes in agenda, location, time, or resource speakers. Because of the urgency of the issues being discussed in the seminars, the evaluation should be on-going and any changes warranted should be made expeditiously. *Finally*, the director should *provide a written summary of results of seminars* to local school officials and news media.

The following model seminars have been selected to illustrate how these procedures might be implemented.

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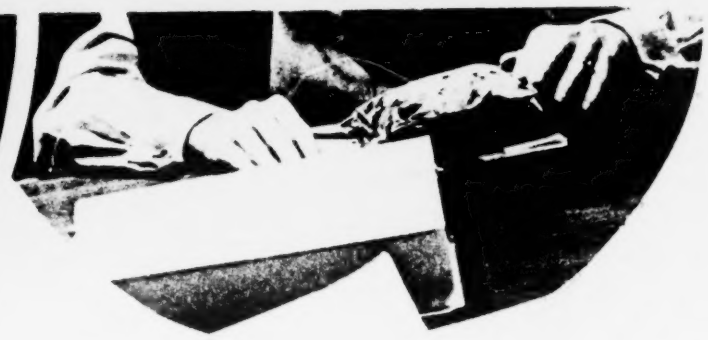


MODEL SEMINAR ONE:
NARCOTICS AND DRUG ABUSE

Consider a typical suburban community with an approximate population of 40,000, in which the continuing education advisory committee, with the guidance of the director of continuing education, decided to focus upon the problems of rising drug abuse among the teenage members of the community. Realizing that many State and local agencies were also working on this problem, the community asked what could be done locally to curb this ever-increasing menace.

A steering committee was formed which consisted of interested citizens from all walks of life. Included were student representatives from the local high school, some of whom were former drug users or were still occasional users of marijuana. At the initial meeting, the possible causes of drug abuse in the community were discussed. After these causes had been identified, a plan of attack in terms of a community-wide program was initiated. With this in mind, a committee prepared a list of the possible reasons that may have lead teenagers to turn to drugs. Although there were many reasons given for teenage drug use and abuse, the following were cited as being the most common:

- *experimentation* This category represented by far the largest percentage of users. This was attributed to what the psychologists referred to as the "natural curiosity drive."

- *boredom* It was found that, due to lack of good public transportation facilities and recreation centers, the unmotivated teenagers just "hung around" looking for excitement.

- *thrill seekers* This was similar to boredom but engaged in on a more premeditated basis and very often in groups of two or three.

- *peer-group pressure* Depending upon one's circle of friends, there was the potential for using drugs to become the "in" thing to do.

- *alienation and emotional disturbance* This stereotyped, sociological reason existed, but it was felt that only a small percentage of drug users fit into this category.

- *self-exploration* It was thought that a few drug users, especially those using the hallucinogens, did so in hopes of gaining an increased awareness of their "real selves." This concept came about with the repeated emphasis upon self-expression, individuality, and the "new morality," which prizes private experience and inner sensation.

- *pseudoreligious* To many young people, religion, country, family, and school had lost their appeal. Therefore, drug use had become a substitute for these traditions.

As the reasons for teenage drug abuse were listed, it became evident that the adult community not only lacked an awareness of the extent of the problem, but they did not have much information regarding the psychological, sociological, or medical aspects of it. It also became evident that most parents did not discuss vital issues with their children. Since this meeting generated dialog, it was necessary to set a time for adjournment. The meeting was terminated with the suggestion that possible programs be thought of and brought back for consideration at the next meeting.

When the steering committee reconvened, it was decided that two obstacles had to be overcome before any inroads could be made toward stemming the tide of drug abuse. First, the parents of the community had to be made aware of the extent and ramifications of the problem. Second, an attempt had to be made to bridge the communications gap that obviously existed between the parent and the child so that a concerted family effort would be forthcoming. The steering committee agreed that if the members of a family unit began to talk to each other about the problem, better understanding would result and the chances of drug abuse would be decreased considerably.

Now that there was some direction in the planning, the next step was to evolve a program or series of programs by which the established goals could be accomplished. An initial program was developed that set the stage for meaningful dialog between parents and teenagers and at the same time provided some insight into the current wave of drug abuse in the community.

This was not easily accomplished; however, the idea of inviting all parents and their junior and senior high school age children to an evening program, entitled "Drugs: A Family Affair" was thought to be the best course of action. For this program, a short assembly period in the auditorium was planned, at which time the purpose and the goals of the evening were explained and a brief overview of the narcotics and drug abuse problem was made. After this introductory session, it was agreed that, if a meaningful dialog was to take place, the assembly would have to break into small groups of twenty to twenty-five with students and parents in each group. One parent and one teenager were assigned to each group to function as discussion leaders.

At this point it was suggested that subcommittees be formed in order to more effectively complete the plans for the program. The subcommittees were assigned to handle assembly programs, discussion groups, publicity, hospitality, typing and printing, information gathering, and evaluation.

The primary concern of the *assembly program committee* was to determine the best possible method of introducing the topic so as to arouse concern on the part of the audience and to explain the format of the evening's program. At this committee's first meeting many ideas were generated. Among the possibilities were:

- showing a film dealing with drug abuse
- presenting a skit or short playlet dealing with drug abuse

- inviting a narcotics officer, former drug addict, local judge, school administrator, athlete, pharmacist, physician, psychologist, or religious leader to be a guest speaker

- including a short introduction by the director of continuing education

The committee decided that, in the interest of allowing sufficient time for small group discussion, the initial assembly should be brief. They therefore decided to ask a local official to outline the extent of the illegal drug problem in the community. In addition, the director of continuing education was asked to sketch the purpose and procedures of the program.

The enthusiasm which permeated the entire program was due largely to the efforts of the *discussion group committee*. This committee sent letters to a number of community leaders and high school students asking if they would be willing to participate in the program as discussion leaders or moderators. The response was overwhelming and those who indicated a willingness to participate as group leaders were invited to a training session at which time they were given a basic introduction to the dangers of the illegal use of drugs.

The latter was offered as a mini-inservice course by a narcotics officer and dealt primarily with five areas: the history and background of the use of drugs, the extent of the problem in the country, the pharmacology of drug abuse, the facilities and help available for those in the community who have become drug abusers, and what the layman can do to assist in curbing the drug abuse problem. The course took place on three successive evenings with all of the volunteers present.

Once this phase of the training was completed, the groups were brought together again for a single session dealing with the role of the moderator. At this time, methods and techniques of promoting discussion were explored. The committee chairman was well versed in the area of group dynamics and, with the assistance of the rest of the committee, evolved an excellent approach toward leading group discussions in the area of drug abuse.

The ability of the volunteers to lead discussion groups was further reinforced by a high school English instructor who introduced the moderators to much of the material on group dynamics which is included in the section, Supplementary Materials for Training Moderators.

A *publicity committee* was established and charged with the responsibility of promoting the program in such a way that community-wide support would be received and a good attendance insured. Members of this committee submitted spot announcements to local radio stations; provided news releases and topical stories to the local newspapers; distributed posters and flyers to community organizations; and contacted school-related groups such as the student council, P.T.A., and board of education in hopes that their respective news media would carry information about the program.

The publicity committee found the following suggestions helpful in carrying out their responsibilities:

- Determine the audience you wish to reach and design your appeal with them in mind.
- Type all news releases on 8½ x 11 inch plain white paper. Double space and use one side of the paper only.
- Include in the first sentence five points that are essential to any good news release: who, what, when, where, and why.
- Use short words and brief sentences in giving the remaining details.
- Always give the exact date in a news release. Use "January 14" rather than "next month" or "next Friday."
- Include the name, address, and telephone number of a person to be contacted for further information.
- Specify when the announcement is to be made public.
- After the release has been printed, or the spot announcement made, follow up by sending a letter of appreciation to the cooperating media.

If the school district employs a public relations expert, he should be asked to serve as a member of this committee. An alternative would be to ask a public relations officer in business, industry, or media to serve as advisor to this committee.

The formation of a *hospitality committee* seemed like a detail of small importance, yet the functions of this committee proved to be an integral part of the program. At the conclusion of the individual group sessions, the serving of refreshments provided an atmosphere that was conducive to continuing the discussions that took place in the previous sessions. This informal gathering also set the stage for meaningful, evaluative dialog between youth and adults who may or may not have attended the same session. In this way, more "mileage" was gained from the program itself. The refreshments were prepared and served by students in the home economics classes.

Another responsibility assumed by this committee was to provide ushers that were stationed in the auditorium before the assembly and in the halls afterwards for the purpose of directing people to the various discussion rooms.

The *secretarial and printing committee* typed and mimeographed reports of the subcommittee, news releases, minutes, and group discussion summaries. Public announcements and flyers that needed printing were also edited and forwarded by this committee to either a local printer or the high school printing shop.

An *information gathering committee* assembled for the subcommittees:

- statistics regarding the local use of illegal drugs
- detailed descriptions of the efforts of other communities to conduct similar preventive programs
- bulk quantities of pamphlets published by agencies interested in curbing the illegal use of drugs
- a list of available films and speakers dealing with this problem
- a list of all the local, State, and Federal agencies from which citizens might obtain further assistance in coping with a personal drug problem

The degree to which the seminar accomplished what it intended to accomplish was assessed by an *evaluation committee*. This committee also suggested followup activities.

Two evaluation techniques were used by this committee. The first utilized a mimeographed questionnaire which was distributed to each participant as he entered the auditorium. This questionnaire is reproduced below.

Seminar participant:

In order to better service our community, and to respond to the needs of the residents, it would assist us greatly if you would complete the following questionnaire this evening and return it to the ushers before you leave.

The results of this survey will aid us in planning future programs.

Thank you for your cooperation,

Director of Continuing Education

No names are required for this survey; however, it would help us if you indicated your status.....Adult____ Teenager_____

1. *Were you aware of a drug problem in our community prior to this program? yes_____ no_____*

2. *If your answer to the previous question was yes, did you think the problem was as critical as described this evening? I thought it was worse_____. I didn't realize it was so bad _____.*

3. *Was the guest speaker informative? yes_____ no_____*

4. *Did you find that the group discussions served the purposes for which they were intended?*

   a. *Promoted dialog between youth and adults*
      *yes*_____*no*_____
   b. *Informative insofar as the scope of the drug problem in our community*
      *yes*_____*no*_____
   c. *Informative insofar as the dangerous effects of misusing drugs*
      *yes*_____*no*_____
   d. *Provided insight as to why our teenagers are turning to drugs* *yes*_____*no*_____

5. *As a result of this program, would you be better able to handle a problem if one developed in your household?*
   *yes*_____*no*_____
6. *Would a followup program dealing with the problem of drug abuse be useful?* *yes*_____*no*_____
7. *Do you think a program of this type would be useful in dealing with other problems in our community?*
   *yes*_____*no*_____

It is essential that the questionnaire be comparatively short and easy to fill out, but at the same time, the questions should be easy to collate, meaningful, and be able to provide the director of continuing education with some direction for future seminars.

A second method of evaluation, carried out in the individual discussion groups, required that the moderators designate a recorder for each session. These recorders were asked to jot down pertinent remarks, questions, or any other observations which they thought would be of interest to the other participants not attending their discussion group. All the minutes were then collected, duplicated, and distributed to all participants. These collections of minutes gave the evaluation committee an opportunity to review the effectiveness of the individual group sessions. A sample of the minutes of one session is reproduced below. The recorder was a high school student.

> *Group consisted of about 10 students and 14 parents. Students - 9 J.H.S., 1 S.H.S., four boys, six girls.*
>
> *Adult leader opened session by restating objective of program, i.e., to discuss and exchange ideas on the effect of communication between parent and child in relation to drug and other problems.*
>
> *Youth leader (who participated well in the total session) made an opening statement regarding the objective of senior high students to show by example that kids could be intelligent, with it, etc., and still be free of any involvement or experimentation with drugs.*

Before we could discuss what format would be used to open discussion, one male adult asked, "How much of a drug problem does Blankville have?" Adult leader responded that attendance for the evening would confirm there was a real concern in the community and even if we only had a few involved at the moment, this was going on all around us and could explode in Blankville at any time.

The session was then steered back to the planned approach by asking one of the students what she heard from the other kids relative to their discussing drugs with their parents.

This got the ball rolling and responses indicated a wide variety of approaches by parents, ranging from no discussion to reviewing with children all newspaper stories regarding kids involved with drugs and emphasizing the bad effects and results. Most parents seemed to pursue a middle-of-the-road course. No one admitted ignoring the problem, but several apparently made a one shot stab at it with no followthrough.

Majority agreed this was not enough and felt we had to work at keeping the communication between parent and child active and working-this meant listening as well as talking. It also meant spending time at least with the newspapers if not other research to stay informed as to what was going on.

Parental criticism was voiced at the slow reaction to the drug problem by school authorities and the police department. One teacher present (not from Blankville district) said until recently her school had no organized plan, although they had had some problems. All teachers were authorized to send suspected students to principal's office.

Another parent expressed belief that police activity should be intensified but kept out of the school building itself.

One male student felt lack of organized activity after school made excess time available, caused boredom, and increased the possibility of experimentation and involvement.

Beer and marijuana seemed to be the students' focal point. They state marijuana has not been proven harmful; therefore, they see no reason why not to smoke it. Adults called their attention to the fact that it had not been proven unharmful; therefore, why should they wish to take the chance.

Some students felt the necessity to conform to their peer groups to secure an identity of their own, and objected to policing by mothers. One mother asked,"Why just mothers?" and a discussion revealed the reason is because mom is around more while dad is out earning money to support his family.

In answer to the question, "What can a parent do?" I read a portion from the booklet, "What You Should Know About Drugs and Narcotics" and advised they obtain a copy as soon as possible. I also introduced them to "Drug Abuse - Chemical Cop-out" and advised how it could be obtained.

This program was most successful and certainly its purpose was fully achieved.

SUMMARY

Within the group present, complete agreement was reached that use of all drugs was to be avoided on a regular basis. Only one male adult and one male student expressed belief that experimentation with marijuana might be acceptable.

Unanimous agreement was reached that basic responsibility must be shared primarily by the students and parents, although support must also come from religious leaders and school authorities.

John Ellsworth

In this seminar, the director of continuing education had anticipated the problem of dividing as large an audience as 600 into groups of 15-20 people and he thus employed the following logistic in effecting a smooth transition from the large group session to the smaller discussion groups.

As participants entered the auditorium they were handed, in addition to the previously mentioned questionnaire, a 3x5 card on which was written a room number. It was carefully worked out in advance that there were to be 20 cards bearing the same room number and of these 20 cards, 10 were to be of one color and 10 of another color. One color was to be handed only to adults, the other only to young people. Participants from the same family were encouraged to attend different sessions.

Following the group sessions, everyone convened in the cafeteria for refreshments and the chairman of the local Narcotics Council was called upon to explain the aims and functions of his organization. At this time, several of the participants expressed a desire for followup activities. After quickly consulting the chairman of his various subcommittees, the director of continuing education made the announcement that there would be some followup activities and that the public would be informed of them as soon as the subcommittees had worked out the details.

The evaluation committee then met to review the returned questionnaires and the compiled minutes. It was the findings of this committee that the seminars, while being extremely helpful, failed to answer the following questions:

- What is the extent of the drug abuse problem in our community?
- Why does one child turn to drugs while a child with a similar homelife does not?

- What is the effect of taking drugs over a short period of time compared to an extended period?
- What can a parent do when he discovers his teenage son or daughter is using drugs?
- Is the occasional use of marijuana dangerous?
- Does the use of marijuana lead to the use of other drugs or narcotics?
- What can we, as interested parents, do to alleviate, control, or stop the abuse of drugs in our community?
- What should a teenager do when he discovers a close friend is hooked on drugs?

The steering committee decided that these questions could best be answered by submitting them to a panel composed of representatives from law enforcement agencies, the drug abuse commissions, and a rehabilitation center for drug addicts.

At the followup assembly program, which was promoted in fashion similar to the initial seminar, the representatives attempted to answer the questions that had been given to them, and, in addition, the floor was opened for further inquiries. In the exchange of remarks which ensued between members of the panel and the audience, it became apparent that no one person had all the satisfying answers and promising solutions but rather, the use of illegal drugs was definitely a social problem that would require concerted and extensive effort to solve.

Therefore, as a result of these seminars, the governing body of this municipality established a Narcotics Guidance Council. In addition, it was found that the Narcotic Addiction Control Commission would provide limited funds for such activities of the Council as supplying hot lines, counseling, and drug education.

Supplementary material for this seminar is found on pages 28 through 39.

hallucinogen ***kids*** ***pusher*** ***prevent*** ***rehabilitate*** ***narcotic*** ***marijuana*** ***treatment***

MODEL SEMINAR TWO:
ENVIRONMENTAL DECAY

All communities - rural, suburban, and metropolitan - are faced with the difficult task of maintaining environmental quality. In late 1969 the National Conference of the U.S. National Commission for UNESCO met in San Francisco to consider this problem. A strong youth contingent was present and became the activist voice for the conference. Their theme is worthy of note: "We are not here to underwrite the epitaph for the loss of our environment. We are here to underwrite a program of environmental repair.... to chart a course to salvage our habitat....this is the beginning of an environmental renaissance."

Sterling Bunnel, M.D., added that, "Any really meaningful cultural exchange will involve education in a much broader sense than we have usually defined it. Since the survival of all humans is at stake, environmental education should become a community goal rather than just another subject taught in the school system."

A continuing education seminar would provide the members of a community with an ideal opportunity for focusing on that which threatens the quality of their environment. Such a seminar should be conducted along the same guidelines as those described in model seminar one.

The steering committee in this instance should also include representatives from any group in the community that is actively engaged in promoting the quality of their environment. They should contact the following local groups:

- garden clubs
- Isaac Walton leagues, Audubon societies
- Boy Scouts, Girl Scouts, 4-H clubs
- granges
- health and safety departments
- sanitation department
- public works commission
- parks department

One of the first tasks of a committee dealing with a subject so encompassing as environmental quality is to establish specific and realistic goals for the seminar. An overview of the national and ecological picture, a study of air and water pollution, or a general review of the effects of population growth are examples of goals that are too broad. Most communities have a host of environmental problems that demand attention. They might include

- water pollution by local industries
- air pollution by local industries
- local flooding which has increased in intensity in recent years
- sewage disposal
- garbage disposal
- necessity for increased public utilities (e.g., gas, oil, electricity) Where should it come from? At what environmental cost?
- need for increased water supplies
- noise abatement (sound pollution)
- preservation of natural areas for recreation, scenery, or ecological control
- town planning proposals
- new housing requirements
- highway proposals

The job of the steering committee is to determine which is most urgent. The various subcommittees, described in model seminar one, should then be established.

The assembly committee must determine how the overall dangers of environmental neglect can best be presented, and how the specific local problem can be meaningfully related to the total effort of conserving and maintaining the environment for the future of mankind.

As an example, assume that a power company has proposed to build a nuclear power plant within the geographical boundaries of a community. Their reason for doing this is to meet the increased demands of the community and surrounding areas for electricity. Such a proposal is certain to have engendered differences of opinions among the members of the community. An introduction to the total environmental picture might be made by a professor of environmental science recruited from a local university or an officer from the recently established Department of Environmental Conservation.

To assist in assessing the severity of the total problem, the section, Supplementary Material for Seminar on Environmental Decay, contains some background information regarding the environmental picture that could be presented either in a pamphlet or by the use of overhead visuals.

At the first meeting of the discussion group committee it should be decided what logistic would best facilitate constructive dialog between the audience and a panel consisting of representatives from the power company and delegates from environmental groups. Perhaps in this type of seminar it might be advisable to assign to each discussion group a moderator, a recorder, and

individuals known to hold opposing views. The audience should address questions to the panel. The moderator needs to guard against the discussion becoming simply a hearing for grievances. He should endeavor to keep the dialog focused on the real problem of whether or not increased consumer demands can be adequately accommodated without threatening the environment.

The discussion group committee should prepare questions similar to the following ones that might be used by the moderator to stimulate dialog in the event that the group is reluctant to ask questions.

- Is increased electrical power really necessary? Why?
- Is electricity produced by nuclear fuel less expensive than that which is produced by coal or gas?
- Is the pollution caused by nuclear fuel more easily controlled than the pollution caused by the burning of conventional fuels?
- How does the power company plan to control the pollution resulting from the proposed plant?
- Is the proposed location for the plant the best possible site?
- Will there be a danger of nuclear explosion or radioactivity from the plant once it begins operation?
- Will the proposed plant affect the tax rate?
- Will the proposed plant affect the cost of electrical power?
- What improvement in service can the community anticipate as a result of the proposed plant being built?

The assembly program should be conducted in much the same manner as was suggested for model seminar one with participants being assigned to discussion rooms as they enter the auditorium. The evaluation techniques could also approximate those used in the previous seminar: a questionnaire to be completed by the participants and minutes of the group sessions to be compiled by recorders. The questionnaire for this program should attempt to ascertain to what degree attitudes were changed or convictions confirmed as a result of the program.

A followup program for a specific environmental issue is not always warranted; however, the director of continuing education should remain alert to the need of the participants to be further informed regarding certain aspects of the issue or to be granted further opportunity to express their concerns. Perhaps such a seminar might also suggest other related issues of an equally urgent nature that could best be resolved through the seminar approach.

Where an obvious case of pollution exists, and where all the participants are in agreement that something needs to be done, then the moderator of the discussion groups should encourage the group to consider possible courses of action. The recommendations of the groups should be included in the recorder's minutes, and they should be presented to all the participants at the time they reconvene in the cafeteria for refreshments. Following this, individuals could volunteer to carry out the recommendations that were approved by the total group. Perhaps a subsequent meeting should, at this time, be arranged for the volunteers to report on the success of their assignments.

It is a distinct possibility that a steering committee established to consider a topic of such national concern as environmental decay, though being *ad hoc* in the beginning, would become quite permanent. In this way the committee could serve as an environmental watchdog providing the impetus for maintaining the stability of our ecological system.

Supplementary material for this seminar is found on pages 40 through 43.

pollution dialog industry population ecology garbage seminars refuse smog

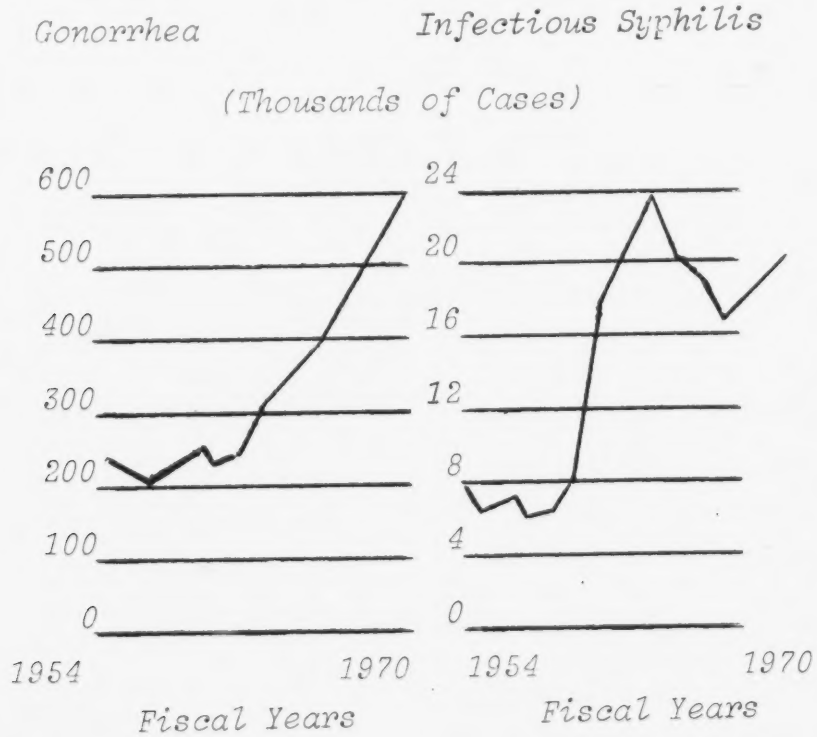
MODEL SEMINAR THREE:
VENEREAL DISEASE

The venereal diseases, gonorrhea and syphilis, have been in existence throughout history. Yet, it is only since the 1930's that they have been considered a proper subject for open discussion. Since these diseases are transmitted almost entirely by sexual contact, methods commonly effective in the control of other communicative diseases have not been very successful.

Syphilis, the more serious of the two venereal diseases, proves to be fatal for one out of every six individuals who become infected and neglect to seek treatment. Early treatment can prevent all or most infectious damage, but if the victim does not seek medical attention, or if he fails to cooperate when identified as having been in contact with an infected sexual partner, then the medical profession is obviously powerless to help that individual.

The following graph, published by the Public Health Service, clearly shows that the incidence of venereal diseases is currently on the rise.

VENEREAL DISEASE IS INCREASING IN U.S.



When penicillin was introduced into medical practice after World War II, the effectiveness of this drug in curing syphilis and gonorrhea led to a sharp decline in the incidence of venereal diseases. Then, in the early 1950's, when it appeared that these diseases were under control, many levels of government decreased the allocation of funds for this important health program and many highly trained people were transferred to other public health areas where their talents were also needed.

Another important factor which has contributed to the rising incidence of venereal disease is the increase in sexual promiscuity which has occurred during the last 15 years. The population has grown rapidly, and people are moving more to the urban centers where parental control is seemingly more reduced than in rural areas. In addition, the increase and growing acceptance of homosexuality has been cited as a reason for the increased incidence of venereal disease.

Prostitution has also been alleged to be a large contributing factor in the VD increase. Since it is difficult to enforce the laws prohibiting prostitution, it remains a distinct possibility for one person to infect many. The person seeking medical help rarely discloses the contacts he has had. Followup investigations to curtail the pyramiding effects of the disease are thus thwarted.

From what has been said, it should be obvious that a local epidemic of venereal disease can best be curtailed by a community-wide awareness of the answers to the following questions:

- How extensive is the VD problem in our community?
- Are there chronic sources of this problem in our community? If so, what can be done to curtail their influence?
- What are the symptoms of syphilis and gonorrhea?
- What should a person afflicted with these diseases do?
- What can a parent do to prevent a child from contacting these diseases?
- What are the short and long term effects of VD?
- What are the various community health agencies doing to combat these spreading diseases?
- What can we do to cooperate with these health agencies?

It is encouraging that the secondary schools health curriculum includes a unit on venereal diseases. A continuing education seminar would be one more step in the direction of totally eradicating these dreadful diseases.

The steering committee for this seminar should include:

- a local physician
- a local health department official
- a school nurse-teacher
- a hospital staff member

Unlike the first two model seminars, there is not a great deal of dialog called for in this program. The prime functions should be, rather, to provide information to all segments of the community, to answer specific

questions as they are asked, and to encourage individuals to seek medical attention if they suspect they have contracted the disease.

Promotional efforts need to overcome the apathy of adults who are of the opinion that venereal disease is a problem of no concern to them. The local medical association and health department will assist the director of continuing education in drafting publicity items that will get across to the public the ease with which venereal diseases can be contracted and the rising incidence of these diseases - especially among the teenagers of both sexes.

The assembly program should include an overview of the problem - possibly from a historical view beginning with the discovery of a cure (the antibiotics); continuing with an explanation of the false sense of security that came about in the early fifties; and finally, citing statistics relative to the present severity of the problem. The symptoms of the disease, the manner in which the highly contagious disease is transmitted, and the necessity of early treatment should all receive emphasis at this time. A filmstrip and accompanying tape entitled "The Fight Against VD," available from the Bureau of Continuing Education Curriculum Development, State Education Department, could be used in this phase of the seminar.

When dividing up into smaller discussion groups, it might be advisable to assign all the female participants to one group with a female physician or health officer to serve as a moderator, and all the male participants to another group to which a male physician or health officer has been assigned as moderator. With the sexes separated, the questions that are asked might be of a more frank and relevant nature.

An important item that should be mentioned during this session is the telephone number and address of the local health office or clinic where individuals with problems may receive immediate help. Because some may not even wish to be seen writing down this information it should be included in a handout containing information of a more general nature that is simply distributed to everyone. The moderator could then casually draw attention to the items that are contained in the handout giving no more emphasis to the sources of help than to the general information. Additional copies of this handout should be available for those who wish to distribute them to acquaintances.

Again, as with the seminar on environment, the steering committee which was originally *ad hoc* might well become a permanent community health committee working in conjunction with the board of health, local hospitals, the health teachers of the local schools, and other social service agencies for the purpose of identifying potential health dangers and alerting the community to these dangers. This committee can also act as a catalyst in lobbying for funds to increase local health services such as additional visiting nurses or in passing ordinances that are necessary to maintaining the health of the community.

Supplementary material for this seminar is found on pages 44 and 45.

MODEL SEMINAR FOUR:
YOUTH UNEMPLOYMENT

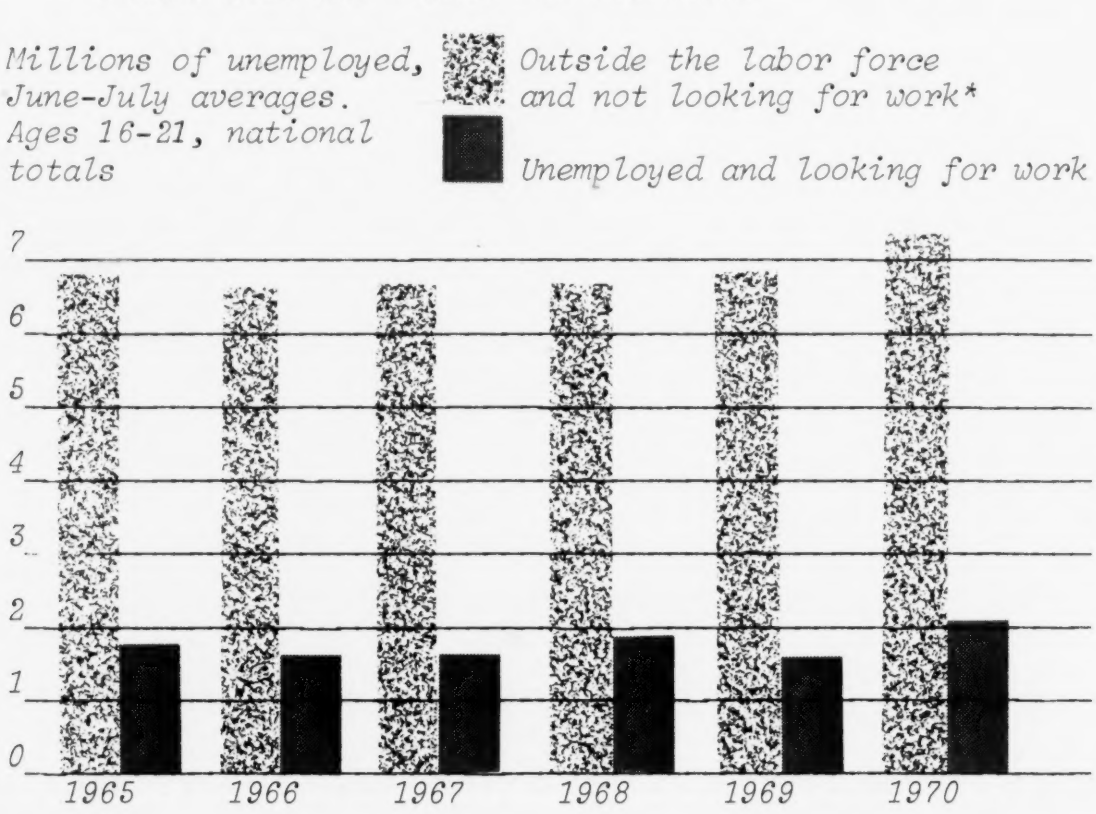
During the summer of 1970, the unemployment rate for persons between 16 and 21 was 15.7 percent. The year before it was 12.8 percent. The Bureau of Labor Statistics indicated that the prospects for employment were so bleak at the beginning of the summer that youths by the hundreds of thousands who desired jobs did not even bother to look.

For Negro youths, the job shortage has been even worse. The Bureau showed that for Negro youths between 16 and 21, the unemployment rate rose from 24.8 for the summer of 1969 to 30.2 for the summer of 1970. In many Negro poverty neighborhoods the jobless rate was much higher.

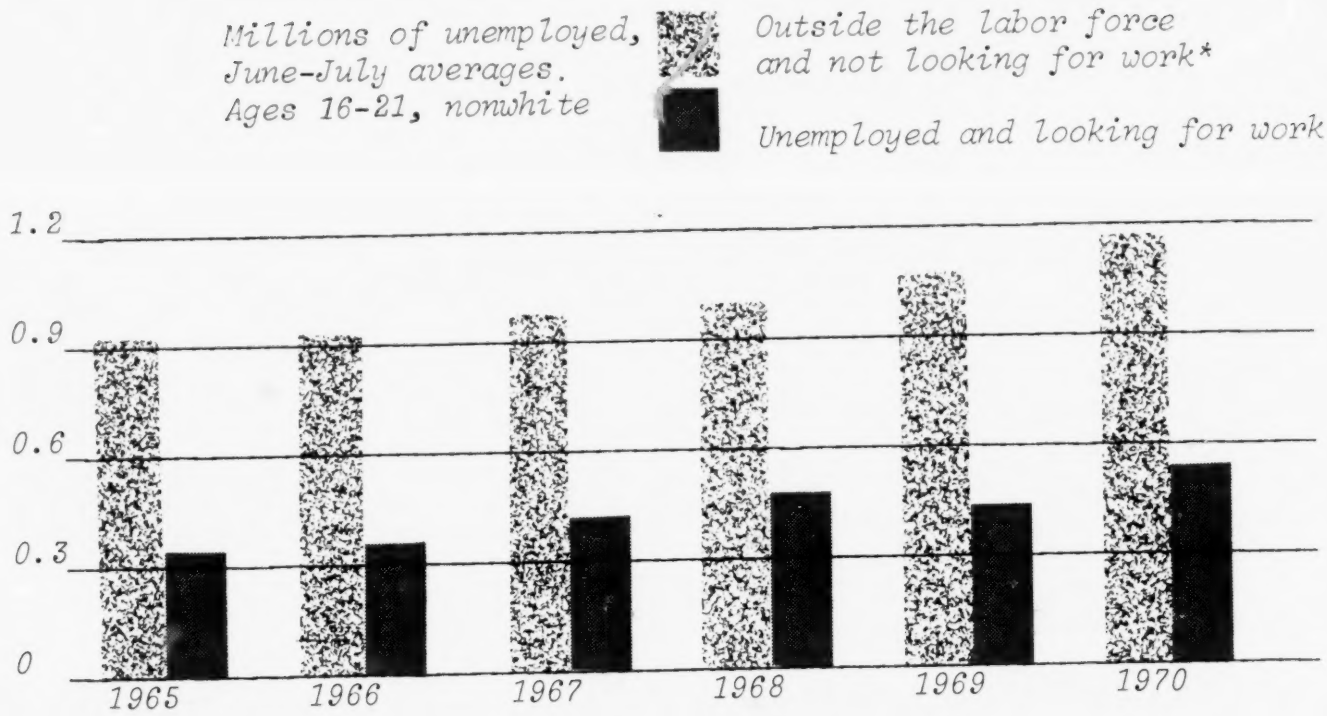
There is evidence that the lack of jobs has contributed to civil disorders, especially in economically depressed areas.

The following chart illustrates the summer unemployment rate in terms of numbers, and if one considers the percentage rates, the increases over the past few years are creating a real problem:

SUMMER JOBS ARE SCARCE FOR TEENAGERS



...ESPECIALLY FOR NONWHITE TEENAGERS



*A large proportion of this category represents youths willing to work but who did not look for jobs in the belief that they were unavailable.

Source: Bureau of Labor Statistics

The steering committee for this seminar should include representatives of the New York State Employment Service, local employment agencies, parents of teenagers old enough to work, the local parks department and department of public works, local merchants, farmers and contractors, and teenagers themselves. The ideas for employment of youth that are generated in this committee should be presented at two different assemblies.

The first assembly should be held during the regular school day and in the high school auditorium. All senior high students should be invited to attend and the director of continuing education and a guidance counselor should chair the meeting. Perhaps the teenage members of the steering committee could make the presentation. The purpose of this assembly would be to apprise the students of what the steering committee is doing and to encourage them to attend the second meeting.

The second meeting should be held in the evening with parents, teenagers, and prospective employers in attendance. This meeting should be chaired by the director of continuing education and an adult serving on the steering committee. At this time the problems of unemployed youth should be explained and possible solutions outlined. Perhaps employers should be given forms to fill out indicating in what way they would be willing to cooperate.

An alternate arrangement, if the steering committee has so decided ahead of time, is to announce the establishing of a local clearinghouse of

employment opportunities for young people. Employers seeking someone to fill a part-time job on a regular basis or individuals having an occasional odd job should be encouraged to contact this clearinghouse which would maintain a registry of youths seeking employment.

Small discussion groups are not particularly warranted for this seminar unless there appears to be a conflict between the youth and the community regarding work opportunities.

The steering committee should be aware of the following programs which could be of assistance in attacking a problem of unemployed youth.

The Neighborhood Youth Corps is a program created by the Economic Opportunity Act and is intended to help young people from low income families by providing them with part-time jobs during the school year and full-time jobs during the summer. More information regarding this program may be obtained from:

Regional Manpower Administrator
U. S. Department of Labor
341 Ninth Avenue
New York, New York 10001

Another program which should be considered is the Concentrated Employment Program. For more information contact:

Employment Service Bureau
Division of Employment
Building 12
State Campus
Albany, New York 12201

Further assistance may be obtained from the:

National Alliance of Businessmen
320 Park Avenue
New York, New York 10022

Division for Youth
2 University Place
Albany, New York 12203

OTHER POTENTIAL ISSUES FOR SEMINARS

The experienced director of continuing education may find that he can offer more than one seminar at a time; however, it is advised that directors making an initial attempt at conducting seminars begin with just one issue and devote considerable time to its preparation and implementation.

Consumer fraud is a much-discussed issue of the day. In many urban centers the government has established a department of consumer affairs to protect the consumer. Yet there are still many consumers who are dissatisfied with the products and services they purchase. This seminar could be the means of informing the public of what they can expect in return for their expended dollar, what avenues of recourse are available to them when they feel that they have been victims of fraud, and what action they can take to improve the quality and lower the costs of products and services presently being offered to them.

An outgrowth of this seminar might be the demand for the continuing education program to offer such mini courses as Consumer Economics, Better Shopping Habits, or Getting the Most For Your Money.

With the population living longer, working fewer hours, and having more money for recreation, it becomes very essential to see that proper and varied *leisure-time activities and facilities* are provided by our communities. More and more communities are employing a full-time recreation director, and it is this person or department that can help in the planning of the program.

This is an all-encompassing issue, not restricted to any age category. Recreation is necessary for the toddler, the teenager, the middle-aged adult, and the senior citizen.

Leisure-time areas and activities must be made available for all members of the community, and again, the group discussion technique will provide the necessary awareness on the part of the citizenry as well as community officials so that major inroads can be forthcoming in this community service.

As a result of this program, a committee could be established which would constantly be on the alert to identify the community's recreational needs and relay these needs to the proper agencies for action.

For example, the committee may see the necessity of a youth center. Their next step would be to find a sponsoring organization such as a local service group, church group, the Y.M.C.A., or school or parks department.

After sponsorship of the center has been established, the committee should assist the sponsoring group in securing a location, setting up the center, and providing assistance for its continued operation.

Though providing for recreation may not sound like an urgent community issue, it yet can be quite important in preventing many other issues, such as vandalism and the illegal use of drugs from developing.

Most medical authorities now classify alcohol as a depressant drug and *alcoholism* as a disease. The fact that this problem can and does result in wasted man-hours, the loss of lives, the degeneration of health, the damage of property, and the disruption of families is reason enough for it to become a topic for the continuing education seminars.

Ideally, the alcoholic himself should attend the seminars, but, realistically he probably will not because of the social incrimination involved. However, a seminar conducted by local health authorities, physicians, and representatives from the Alcoholics Anonymous could meet a real need in informing those close to the alcoholic how they might better cope with the problem.

The financing of public education is an issue vital to every taxpayer in the State. Many school boards already endeavor to inform the public on this subject. Often this is done just prior to the time when the school budget is voted on.

In school districts where this is not done, it would, with the increasing number of annual budget defeats, be advisable for the director of continuing education to approach his board of education with the idea of offering a seminar designed to inform the public of the current laws regarding the financing of public education.

Discussion leaders for this particular event are "naturally" available. School board members, school administrators, and even local legislators should be eager to assist in this undertaking.

As a primary outgrowth of the group discussion, an awareness can be fostered on the part of the community that will be of invaluable assistance during the annual budget voting. An informed public will vote intelligently on all issues.

There are innumerable *current issues* that present themselves during the course of the school year that can easily be adapted to the seminar approach. They may fall into the category of international, national, or local issues.

As an example, some of the timely topics that arose during the year 1970 were:

- *our involvement in Southeast Asia*
- *the Middle East Crisis*
- *the draft*
- *women's liberation*
- *the 18-year-old vote*
- *campus unrest*

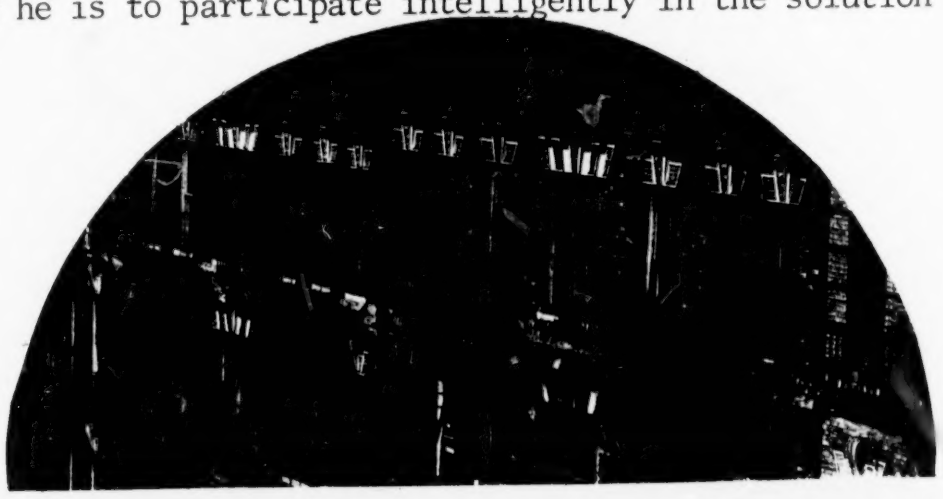
- *racial tensions*
- *youth and crime*
- *care of the elderly*
- *establishing childcare centers*

All of the above issues can be handled effectively by the methods outlined previously.

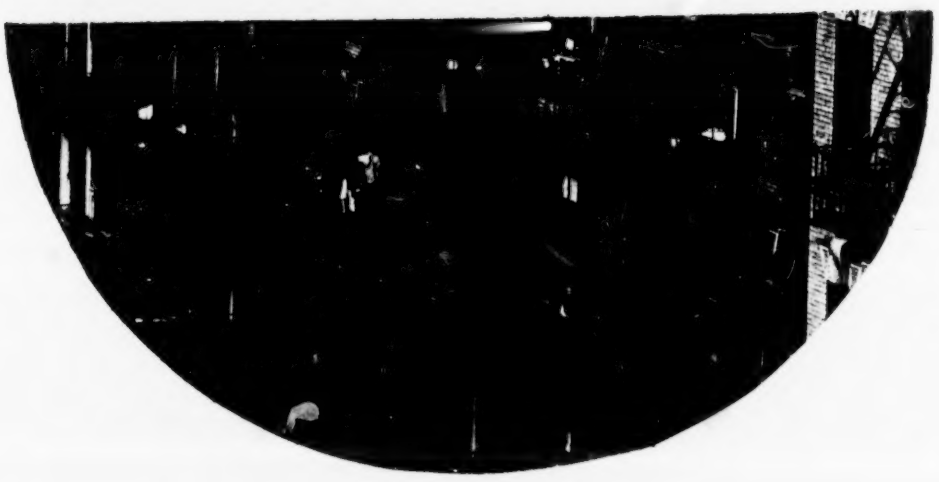
The key, of course, is to provide effective, well-informed discussion leaders. Invariably, the local community will be the best source for these leaders, and one of the important attributes of a good administrator is to be able to tap the wealth of talent that is readily available in his own community.

If all issues and problems that arise within a given community are met head-on, with outlets provided for meaningful, well-moderated discussion, there is every possibility that undue troubles and dissensions can be avoided, with harmony and cooperation coming to the forefront as the basis for the often elusive intracommunity coexistence for which we are constantly striving.

Educational leaders should on their own initiative assume the obligation of calling to public attention those issues concerning the citizens of the community and of providing the facts and alternatives which the individual must have if he is to participate intelligently in the solution of these problems.



urban problems suburban issues seminars issues resolve old majority



SUPPLEMENTARY MATERIALS FOR SEMINAR ON
NARCOTICS AND DRUG ABUSE

The following is not presented as an indepth study of the illegal use of drugs in our society, but as a basic introduction to the problem so that potential moderators will be able to answer some of the anticipated questions.

The abuse of drugs and narcotics is on the rise throughout the country and many people are becoming alarmed about the obvious threat that this trend poses to society in general. The timeworn cliché that we are living in a drug-oriented age can be readily seen as we skim through newspaper and magazine ads, or watch television commercials dealing with cure-alls that can be ingested for any disturbance - psychological, social, or purely physical.

There was a time when one could generalize about those who used illegal drugs in the United States. Today, however, drug abusers can be found in all strata of the socioeconomic range: in urban, suburban, and rural communities; and also in all race and ethnic categories. Probably the most alarming trend of all is the rise in the number of drug users in the junior and senior high school age category.

A brief description of the illegal drugs most commonly used today follows:

Marijuana is a drug found in the flowering tops and leaves of the female Indian hemp plant, Cannabis sativa. The plant grows in mild climates around the world, especially in Mexico, Africa, India, and the Middle East, It can also be grown in the U.S., where the drug is known by such names as "pot," "tea," "grass," "weed," and "Mary Jane."

The drug is made by crushing the dried leaves and flowers of the plant into small pieces. This green product is usually rolled and smoked in short cigarettes or pipes. The cigarettes are commonly known as "reefers," "joints," and "sticks." The smoke from marijuana is harsh and smells like burnt rope or dried grass. Its sweet odor is readily recognized.

Marijuana, one of the least understood of all natural drugs, has been known for nearly 5,000 years. Very early in history, the Chinese used it to relieve pain during surgery, and the people of India used it as a medicine. Today it is used mainly for its mind-expanding effects.

No one knows the exact extent to which marijuana is used in the United States. Some authorities believe that 4 or 5 million Americans may have used the drug at least once in their lives. Other estimates are as high as 20 million. Research studies are currently under way to determine more precisely how widely the drug is used.

How does marijuana work, and what are its effects?

When smoked, marijuana quickly enters the bloodstream and acts on the brain and nervous system. It affects the user's mood and thinking, but doctors

are still not sure just how the drug works in the body, what pathway it takes to the brain, or how it produces its effects.

The long term physical effects of taking marijuana are not yet known because of a lack of research in the field. The more obvious physical reactions include rapid heartbeat, lowering of the body temperature, and sometimes reddening of the eyes. The drug also changes blood sugar levels, stimulates the appetite, and dehydrates the body. Users may get talkative, loud, unsteady, or drowsy and find it hard to coordinate their movements.

The drug's effect is felt quickly - about 15 minutes after inhaling the smoke of the cigarette. Its effects can last from 2 to 4 hours. The range of effects can vary from depression to excitement. Some users, however, experience no mood change at all. The sense of time and distance of many users frequently becomes distorted. A minute may seem like an hour; something near may seem far away.

Is marijuana addictive?

Authorities now think in terms of drug "dependence" rather than addiction. Marijuana, which is not a narcotic, does not cause physical dependence as does heroin or other narcotics. A number of scientists think the drug can cause psychological dependence when taken on a regular basis.

Does the use of marijuana lead to the use of narcotics?

A 1967 Lexington study of narcotic addicts from city areas showed that more than 80 percent had previously used marijuana. No direct cause and effect link between the use of marijuana and narcotics has been found. Researchers point out, however, that *a person predisposed to abuse one drug, may be likely to abuse other stronger drugs*. Also, users of one illegal drug may be exposed to a variety of them through contacts with drug sellers and other users.

Stimulants, which first became available for medicinal use in the 1930's are stimulants to the central nervous system and are best known for their ability to combat fatigue and sleepiness. They are also sometimes used to curb appetites in medically supervised weight reduction programs. The most commonly used stimulants are amphetamines (benzedrine), destroamphetamine (dexedrine), and methamphetamine (methadrine). Slang terms for these drugs include "pep pills," "bennies," and "speed."

Stimulants, when properly prescribed by a doctor, can check fatigue and produce feelings of alertness. In some people this is followed by a let-down feeling or depression hangover. Heavier doses cause jitteriness, irritability, unclear speech, and tension. People on very large doses of amphetamines appear withdrawn, their emotions are dulled, and they seem unable to organize their thinking.

What are the physical effects of stimulants?

Stimulant drugs increase the heart rate; raise the blood pressure; cause palpitations (throbbing heart and rapid breathing); dilate the pupils;

cause dry mouth, sweating, headache, diarrhea, and pallor. They also depress the appetite.

The stimulant drugs are generally swallowed as pills but can be taken in liquid form by injection into a vein at regular time intervals. This is a dangerous practice known among abusers as "speeding."

Are stimulants addicting?

Benzedrine, dexedrine, and other stimulant drugs do not produce physical dependence as do the narcotics. Although the body does not become physically dependent on their continual use, it does develop a tolerance to these drugs so that larger and larger doses are required to feel the effects.

There is, however, a psychological dependence, meaning that the practice can become a habit for mental or emotional reasons, with the person getting used to and turning to the drug for its effects.

Heavy doses may cause auditory and visual hallucinations and a temporary mental derangement requiring hospitalization. Abruptly withdrawing the drug from a heavy user can result in a deep, suicidal depression.

Long term, heavy users of the amphetamines are usually irritable and unstable, and like other heavy drug users, they show varying degrees of social, intellectual, and emotional breakdown.

Sedatives belong to a large family of drugs manufactured for medical purposes to relax the central nervous system. Of these, the best known are the barbiturates.

Barbiturates range from the short-acting, fast-starting, sodium pento barbitol (nembutal) and sodium secobarbital (seconal) to the long-acting, slow-starting phenobarbitol (luminal), amobarbitol (amytal), and butabarbitol (butisol). The short-acting ones are the drugs most commonly abused. The slang terms for these include "barbs" and "goof balls."

What are the medical uses and effects of sedatives?

Doctors prescribe sedatives widely to treat high blood pressure, epilepsy, and insomnia; to diagnose and treat mental illness; and to relax patients before and during surgery.

Taken in normal, medically supervised doses, barbiturates mildly depress the action of the nerves, skeletal muscles, and the heart muscle. They slow down the heart rate and breathing and lower the blood pressure.

In higher or abusive doses, the effects resemble drunkenness. The symptoms are confusion, slurred speech, and staggering. The ability to think, to concentrate, and to work is impaired and emotional control is weakened. Users may become irritable, angry, and combative. Finally, they may fall into a deep sleep.

Barbiturates distort how people see things and slow down their reactions and responses. Since alcohol is also classified as a depressant, the use of barbiturates with alcohol tends to heighten both effects and the result is extremely dangerous.

An overdose of barbiturates can cause death.

Are barbiturates addicting?

YES! These drugs are physically addicting. Some experts consider barbiturate addiction more difficult to cure than a narcotics dependency.

If the drug is withdrawn abruptly, the user suffers withdrawal sickness with cramps, nausea, delirium, convulsions, and in some cases, sudden death. Therefore, withdrawal should take place in a hospital over a period of time on gradually reduced dosages.

LSD, a powerful man-made chemical, (d-lysergic acid diethyl amide) was first developed in 1938. LSD is so powerful that a single ounce is enough to provide 300,000 average doses.

Legally classified as a hallucinogen, a mind-affecting drug, LSD is noted namely for producing strong and bizarre mental reactions and striking distortions in the physical senses.

Except for government-approved use for research, the drug is illegal in the United States. Yet, it is unlawfully produced in makeshift laboratories, and young people, including up to 7 percent of the students on some campuses, have taken it.

Other less known but powerful hallucinogens or psychedelic (mind-manifesting) drugs include peyote, mescaline, psylocybin, DMT and STP.

Why do people take LSD?

Reasons given for taking LSD include, "for curiosity," "for kicks," "to understand myself better," or as part of the quest for religious or philosophical insights. At various times in history, substances as diverse as alcohol, ether, opium, and nitrous oxide (so-called laughing gas) have also been claimed capable of providing an easy and instant path to wisdom or to religious or philosophical insights.

What are the physical and psychological effects of LSD?

An average dose of LSD, amounting to a speck, has an effect that usually lasts from about 8 to 10 hours. Users take it in capsule form or in a sugar cube, cracker or cookie, or they can lick it off a stamp or other objects impregnated with the drug.

It increases the pulse and heart rate. It also causes a rise in blood pressure and temperature, dilated eye pupils, shaking of hands and feet, cold sweaty palms, a flushed face or paleness, shivering, chills with goose pimples, irregular breathing, nausea, and loss of appetite.

The drug is not physically addicting in the way that narcotics are. That is, the body does not develop a physical need for LSD or have physical sickness when it is withdrawn.

People who use LSD say that it has a number of effects. The first effects are likely to be sudden changes in the physical senses. Walls may appear to move; colors seem stronger and more brilliant. Users are likely to see unusual patterns unfolding before them. Flat objects seem to stand out in three dimensions. Taste, smell, hearing, and touch seem more acute. One sensory impression may be translated or merged into another. For example, music may appear as a color, and colors may seem to have taste.

Users also report a sensation of losing the normal feelings of boundaries between body and space. Sometimes they feel they can fly or float with ease.

Among LSD's other effects is the loss of the sense of time; the user doesn't know how much time is passing, but he does remain conscious.

Is LSD dangerous?

Recent reports from hospitals in areas where LSD is used without close medical supervision warn of definite dangers. These dangers include:

- Panic - Because he cannot stop the drug's action, the user may get panicky and fear that he is losing his mind.

- Paranoia - He may become increasingly suspicious, feeling that someone is trying to harm him or control his thinking. This feeling generally last 72 hours after the drug has worn off.

- Recurrence - Days, weeks, or even months after the individual has stopped using LSD, the things he saw and felt while on the drug may recur and make him fear he is going insane.

- Accidental death - Because the LSD user may feel that he can fly or float in the air, he may try to leap out of a high window or other heights and fall to his death. He may also drive or walk in front of a moving car, thinking he can't be harmed.

Does LSD cause birth defects?

Several scientists have reported that the drug causes chromosomal damage or changes when it is added to a tissue culture of white blood cells.

Some researchers have reported fetal damage when LSD was given to pregnant rats and mice, and others describe human birth defects in newborns whose mothers said they took LSD.

Narcotics refers to opium and the drugs heroin, morphine, paragoric, and codeine which are all derived from the juice of the poppy fruit. These opiates are widely used in medicine as painkillers. Cocaine, made from coca leaves, and marijuana, are classified legally but not pharmacologically as narcotic drugs.

What is narcotic addiction?

Once the habit of using narcotics is established, larger and larger doses are required to achieve the same effects. This is a result of the body developing a tolerance for the drug. One of the signs of heroin addiction is withdrawal sickness. When the addict stops using the drug, he may sweat, shake, get chills, diarrhea, nausea, and he may suffer sharp abdominal and leg cramps.

What is the effect of heroin?

Typically, the first emotional reaction to heroin is reduction of tension, easing of fears, and relief from worry. Feeling "high" may be followed by a period of inactivity bordering on stupor.

Heroin, which is usually mixed into a liquid solution and injected into the veins, appears to dull the edges of reality. Addicts have reported that heroin "makes my troubles roll off my mind" and "makes me feel more sure of myself."

The drug depresses certain areas of the brain and may reduce hunger, thirst, and sex drive. Because addicts do not usually maintain a normal intake of nutrition, their hospital care might include treatment for malnutrition. The drug may also reduce feelings of pain.

What is the life of an addict like?

Many addicts admit that once on drugs, getting a continued supply becomes the main drive in their lives. Concentration on getting drugs frequently prevents the addict from continuing either his education or his job. His breath is often bad. He may be sick one day from withdrawal sickness and sick the next from an overdose.

Once addicted, he may become more involved with crime simply because it costs so much to support the heroin habit. For example, it may cost as much as $75 to $100 for an addict to purchase his daily supply of heroin.

What is the Narcotics Addict Rehabilitation Act of 1966?

The Act provides that:

- An addict charged with a nonviolent Federal offense, who elects to be committed for treatment, instead of prosecuted for his crime, can be committed to the Secretary, Department of Health, Education, and Welfare, for examination, treatment, and rehabilitation.

- An addict already convicted of a crime can be committed to the Attorney General for treatment for a period of no longer than 10 years, the maximum period of sentence that could be imposed for his conviction.

- An addict, not charged with an offense, can be civilly committed to the Secretary for treatment upon his own application or that of a relative or other related individual. Care of the addict after his release from the hospital is a key aspect of his treatment.

Local, State, and Federal agencies are anxious to help communities that are willing to establish educational programs in this area. Literature, films, and speakers are available through a variety of agencies.

Posters and pamphlets may be obtained from:

The Advertising Council, Inc., 825 Third Avenue, New York, New York 10022.

American Medical Association, 535 Dearborn Street, Chicago, Illinois 60610.

International Narcotic Enforcement Officers Association, 178 Washington Avenue, Albany, New York 12224.

Narcotics Addiction Control Commission, Executive Park South, Albany, New York 12203.

National Clearing House for Drug Abuse Information, 5454 Wisconsin Avenue, Chevy Chase, Maryland 20015.

New York State Chamber of Commerce, 65 Liberty Street, New York, New York 10015.

New York State Department of Mental Hygiene, 84 Holland Avenue, Albany, New York 12206.

Science Research Associates (SRA), 259 East Erie Street, Chicago, Illinois 60611.

Scope, Stony Brook, New York 22790.

Free films may be obtained from:

National Institute of Mental Health, Drug Abuse Film Collection, Distribution Branch, Washington, D.C. 20409.

State of New York Narcotics Addiction Control Commission, Albany, New York 12203 (or contact the closest branch to you).

The Special Unit on Health and Drug Education, New York State Education Department, has available three guides and kinescopes analyzing the sociological and health hazards implicit in the illegal use of drugs.

There are many films that can be obtained for a nominal rental fee. Some of the more extensive distributors in this field are:

Center for Mass Communication at Columbia Press, 440 110th Street, New York New York 10025.

Film Library, New York State Department of Health, 84 Holland Avenue, Albany, New York 12206.

The Creative Learning Group, 5 Boylston Street, Cambridge, Massachusetts 02138.

Curriculum Studios Inc., 136 Main Street, Westport, Connecticut 06880.

Educational Media, 11559 Santa Monica Boulevard, Los Angeles, California 90025.

Film Distributors International, 2223 S. Olive Street, Los Angeles, California 90007.

Fiorelli Films Inc., Research Drive, Stamford, Connecticut 06906.

McGraw-Hill Films, Hightstown, New Jersey 08520.

NET Film Service, Indiana University Audio-Visual Center, Bloomington, Indiana 47401.

Individuals who are qualified and willing to speak on narcotics and drug abuse may be contacted through county and state agencies, as well as some local institutions. Suggested sources of speakers are:

New York State Narcotics Control Commission, Speakers Department, (consult local phone book for address)

County Drug Abuse and Addiction Commission

Local Hospitals

Local Colleges and Universities

Police Department

Youth Board

Probation Department

District Attorney's Office

Local Narcotics Addiction Rehabilitation Centers (Topic House, Daytop Village, Synanon, etc.)

Much of the above information was obtained from pamphlets produced by the National Institute of Mental Health, P.O. Box 1080, Washington, D.C. 20013. These pamphlets may be obtained in bulk quantities. They are:

- *Narcotics (PHS Publication #1827)*
- *LSD (PHS #1828)*
- *Marijuana (PHS #1829)*
- *The up and down drugs (PHS #1830)*

A number of books which would provide helpful background information are available. An annotated listing of some of them follows.

Blum, R., Ph.D, & Associates. Drugs I: society and drugs, social and cultural observations. Drugs II: students and drugs, college and high school observations. San Francisco. Jossey-Bass Publishers. 1969. ($20 for two volumes.) These two volumes contain the results of 8 years research by Blum and his associates and include historical, cross-cultural, social, and psychological studies on drug use and abuse. They are based on work covering over 200 cultures and 20,000 individual interviews and questionnaires.

Cohen, S. The drug dilemma. New York. McGraw-Hill. 1968. ($4.95, paperback $2.95.) Concise description of drug use, focusing on relationships between the agent, the host, and the setting. Drug abuse progenitors discussed. Excellent advice to parents and educators on dealing with drug problem.

Ebin, D., (ed.). The drug experience. New York. Grove Press. 1965. (95¢) First person accounts of addicts, writers, scientists, and others regarding cannabis, opium, opiates, peyote, mushrooms, and LSD.

Nowlis, H. H., Ph.D. Drugs on the college campus. New York. Anchor Books, Doubleday. (95¢) An exhaustive appraisal in lay terminology which educators may find useful. It covers terminology, attitudes, chemistry, sociology, law, morality, and education as they affect both the user and society. The book contains an annotated bibliography, a glossary, and Dr. Joel Fort's comprehensive chart on drugs and their effects.

Ropp, R. S. Drugs and the mind. New York. Grove Press. 1957. (95¢) A biochemist discusses the mental effects of chemicals in the brain and on the brain. The book is 12 years old, but still generally valid.

Schur, E. M. Crimes without victims: deviant behavior and public policy. Englewood Cliffs, N.J. Prentice-Hall. 1965. ($1.95) The classic plea for attention to public policy concerning abortion, homosexuality, and drug-taking.

Solomon, D., (ed.). The marijuana papers. Indianapolis, Ind. Bobbs-Merrill Co. 1966. ($10) Reprint of some classic and out-of-print papers dealing with marijuana. Divided into sections considering: 1) historical, sociological, and cultural; 2) literary and imaginative, and 3) scientific.

Taylor, N. Narcotics: nature's dangerous gifts. New York. Delta Publishing Co. 1963. (75¢) (also Dell $1.65.) Despite the misleading title, a sound lay description of many of the mind-altering drugs.

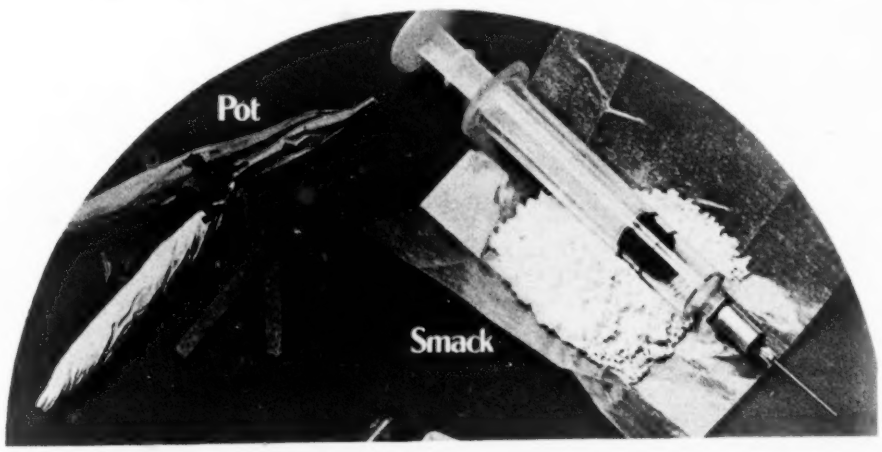
Three periodicals dealing with the drug problem are published currently.

Drug Dependence. National Clearinghouse for Mental Health Information. NIMH, Chevy Chase, Maryland 20015. Published at random intervals. Addressed to the scientific and medical community and other concerned professionals. Contains selected items covering recent developments in the field and identifies citations to the current abstracts available from NCMHI.

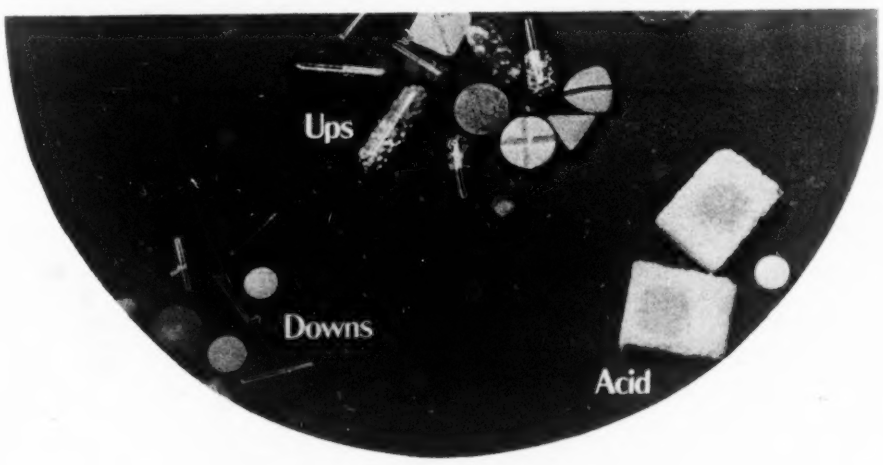
UN Bulletin on Narcotics. United Nations Publications, Room 1059, UN Bldg., New York 10017 (quarterly, $2 per year). Official notices of reports of meetings and actions taken by United Nations, including World Health Organization, which relate to drugs. Contains original scientific research papers and review articles.

The International Journal of the Addictions. Issued semiannually by the Institute for the Study of Drug Addiction, 680 West End Avenue, New York 10025 ($6). Provides a worldwide forum of exchange among professionals participating in research training, and treatment in the field of addictions and substance misuse. An international editorial board, comprised of members of the various medical professions, focuses on all facets of substance misuse -- drug, alcohol, tobacco, and food.

The chart on pages 38 and 39 is useful for gathering quick information regarding the commonly abused drugs. Perhaps it should be duplicated and distributed to the group moderators or even to all seminar participants.



facts ***high*** ***addiction*** ***dialog*** ***LSD*** ***pot*** ***speed*** ***parent*** ***trip*** ***joint*** ***teen***



DRUG ABUSE PRODUCTS REFERENCE CHART

Prepared by Smith Kline & French Laboratories, Philadelphia, Pa. 19101

Drug	*Pharmacologic Classification*	*Bureau of Narcotics and Dangerous Drugs Controls*	*Medical Use*	*Potential for Physical Dependence*	*Potential for Psychological Dependence*
Morphine (an opium derivative)	Central Nervous System Depressant	Narcotic (Per Harrison Act, 1914)	To relieve pain	Yes	Yes
Heroin (a morphine derivative)	Depressant	Narcotic (Per Harrison Act, 1914)	To relieve pain	Yes	Yes
Codeine (an opium derivative)	Depressant	Narcotic (Per Harrison Act, 1914)	To relieve pain and coughing	Yes	Yes
Paregoric (preparation containing opium)	Depressant	Narcotic (Per Harrison Act, 1914)	For sedation and to counter-act diarrhea	Yes	Yes
Meperidine (synthetic morphine-like drug)	Depressant	Narcotic (Brought under Harrison Act in 1944)	To relieve pain	Yes	Yes
Methadone (synthetic morphine-like drug)	Depressant	Narcotic (A 1953 amendment to the Harrison Act brought drugs like methadone under control)	To relieve pain	Yes	Yes
Cocaine	Central Nervous System Stimulant	Narcotic (Per Harrison Act, 1914)	Local anesthetic	No	Yes
Marijuana	Hallucinogen	Narcotic (Per Marijuana Tax Act, 1937, plus subsequent restrictive legislation which covered marijuana and narcotics together)	None	No	Yes
Barbiturates (e.g., amobarbital, pento-barbital, secobarbital)	Depressant	Controlled drug products (Per Drug Abuse Control Amendments, 1965)	For sedation, sleep-producing, epilepsy, high blood pressure	Yes	Yes
Amphetamine drugs (e.g., amphetamine, dextroamphetamine, methamphetamine—also known as desoxyephedrine)	Stimulant	Controlled drug products (Per Drug Abuse Control Amendments, 1965. Methamphetamine added to list of controlled drugs in May, 1966.)	For mild depression, anti-appetite, narcolepsy	No	Yes
LSD (also mescaline, peyote, psilocybin, DMT, STP, THC)	Hallucinogen	(Brought under Drug Abuse Control Amendments in September, 1966)	(Medical research only)	No	Yes
Glue (also paint thinner, lighter fluid and other aromatic hydrocarbons)	Depressant	No Federal controls. Glue sales restricted in some states.	None	Unknown	Yes

Tolerance	*Possible Effects When Abused*	*How Taken When Abused*
Yes	Drowsiness or stupor, pinpoint pupils	Orally or by injection
Yes	Same as morphine	Sniffed or by injection
Yes	Drowsiness, pinpoint pupils	Orally (usually as cough syrup)
Yes	Same as morphine	Orally or by injection
Yes	Similar to morphine, except that at higher doses, excitation, tremors and convulsions occur	Orally or by injection
Yes	Same as morphine	Orally or by injection
Yes	Same as morphine	Orally or by injection
No	Extreme excitation, tremors, hallucinations	Sniffed or by injection
No	Drowsiness or excitability, dilated pupils, talkativeness, laughter, hallucinations	Smoked or orally
Yes	Drowsiness, staggering, slurred speech	Orally or by injection
Yes	Excitation, dilated pupils, tremors, talkativeness, hallucinations	Orally or by injection
Yes	Excitation, hallucinations, rambling speech	Orally or by injection
Yes	Staggering, drowsiness, slurred speech, stupor	Inhaled

SUPPLEMENTARY MATERIALS FOR SEMINAR ON
ENVIRONMENTAL DECAY

Environmental studies departments have been instituted by many of the universities throughout the world. This is an outgrowth of the total concern being shown today for the misuse of our environment by virtually all of the inhabitants of our planet.

Surprisingly enough, it is only recently that our scientific community has been heard loud and clear regarding the pollution of land, air, and water: the abuse of our natural resources; and the controlling of radiation hazards. This is not to say that over the years scientists have not spoken out against these very things, but they were few and far between, and there was no concerted effort until the last few years.

The environmental crisis can be approached from many viewpoints. The preferred one deals with the problem of impending shortages and excesses. This is strictly a statistical and scientific approach and does not necessarily include the esthetic values. It only skims the surface of our ecological balance and imbalance, although the implication is there to be expanded upon. However, in a program of the type suggested, this statistical overview can have an immediate and effective impact upon the community.

What are some impending shortages?

Supplies of *energy*, in the form of the most commonly used fuels of today, are being rapidly depleted. The following chart approximates the duration of possible fuels - providing that the population of the earth remains constant.

FUEL	*WILL LAST APPROXIMATELY*
oil	*30 years*
oil shale	*300 years*
coal and gas	*300 years*
nuclear fission	*1,000 years*
nuclear fusion	*indefinite*
solar energy	*100 billion years*

Science and technology must shift the emphasis soon to the nuclear fuels and explore the possibilities of solar energy in order to adequately supply the world's power needs. At the same time, all precautions must be taken to assure the protection of our environmental system.

Pure water is even now becoming scarce. In the United States alone, 350 billion gallons of water a day are consumed. At the present rate of increase, by the year 2000, we will need a trillion gallons a day. The Senate Select Committee on Water Pesources warned in 1965 that we will be critically short of water in five of the 22 water-resource regions of the United States by 1980. By the year 2000, resources will have been developed to the limit, water economies will be in effect, and the arid regions will need additional water if their economic growth is to be maintained.

There are many projects underway throughout the country to remedy this situation. Probably the most glamorous are the nuclear desalinization (desalting) plants which combine the purification of sea water with the production of electricity. These too, have been under attack as purveyors of radiation hazards and air pollution.

It is hard to conceive of *air* being in short supply, but if we are talking about "breathable" air, the problem is of staggering dimensions. The following chart, obtained from an article by Helmut E. Landsberg, "Metropolitan Air Layers and Pollution," first published in the Garden Journal, 1969, illustrates the major sources of air pollution in the United States. The figures given are in millions of tons per year emitted into the atmosphere. (< means less than.)

	CARBON MONOXIDE	*SULFUR OXIDES*	*HYDRO-CARBONS*	*NITROGEN OXIDES*	*PARTICLES*	*OTHER*	*TOTALS*
TRANSPORTATION	*66*	*1*	*12*	*6*	*1*	*<1*	*86*
INDUSTRY	*2*	*9*	*4*	*2*	*6*	*2*	*25*
GENERATION OF ELECTRICITY	*1*	*12*	*<1*	*3*	*3*	*<1*	*20*
HEATING	*2*	*3*	*1*	*1*	*1*	*<1*	*8*
REFUSE DISPOSAL	*1*	*<1*	*1*	*<1*	*1*	*<1*	*4*
TOTAL:	*72*	*25*	*18*	*12*	*12*	*4*	*143*

The industrial revolution of the last century, which provided the first large-scale mass of atmospheric pollution, has been replaced by the internal combustion engine as the number one source of pollution.

The economic losses from air pollution in the United States alone are estimated at $7 billion annually. Of more concern are the health effects on man and other biological systems from exposure to chemical contaminants in the air.

The problem is to stop the pollution of our atmosphere by finding alternate processes, so that in the not too distant future we will still have enough "clean" air to carry out our natural respiratory functions.

At the present rate of food consumption and population increase, our *food supply* will be inadequate by the year 1998.

With the average consumption of food approximating 500 pounds per person each year, the amount of nitrogen available, which is the prime element in the nutrient protein, will be at a premium within 35 years.

There is an obvious shortage of *space* in the world today. The following statistics were made available in 1968:

In the Netherlands there are 800 persons occupying every square mile; in Japan, 600 persons; Indonesia, 100 persons; and in the United States, which happens to be the world average including farms and desert areas, 50 persons for every square mile. It has been estimated that space will be at a premium if our population increases at its present rate and if our industrial economy continues to use up available land areas.

What are some impending excesses?

The most repeated statistic is that at the present rate of *population* increase, the earth's population will double over the next 30 years. This means that the present 3.5 billion will reach 7 billion by the year 2000, and the United States population will approach 350 million. One can project the situation even further. By the year 2050, which is within the life span of some people now living, there will be 10 bodies where there is presently one - a virtually inconceivable situation.

There are two ways to curb the expected increase: one is voluntary, the other compulsory. There are many who feel the voluntary route is adequate, especially since the average family size in the United States has decreased from six to three. On the other hand, some demographers contend that the voluntary approach is futile since the conscientious couples will comply while the irresponsible ones will not, and the world will end up populated by the irresponsibles.

The Environmental Council, in a report released in August of 1970, highlighted the seriousness of the situation. It reported, "Assuming a fixed or nearly fixed resource base, continued population growth embodies profound implications for the United States and the world. Environmental quality is difficult to achieve if population growth continues."

The concept of zero population growth is currently gaining popularity and offers promise in curtailing this excess.

Strange as it may seem, there may be an excess of *heat* in the near future. Carbon dioxide released into the atmosphere at extremely high rates has produced what is known as the "greenhouse effect" around our planet. Both glass and carbon dioxide tend to pass visible light but absorb infrared rays. This explains why the sun so easily warms a greenhouse in winter. Light from the sun enters through the greenhouse glass. Inside, it is absorbed by soil and plants and converted to heat energy, which remains because it cannot pass through the greenhouse glass.

In essence, carbon dioxide makes a huge greenhouse of the earth, allowing sunlight to reach the earth's surface but not allowing the converted heat to leave. The temperature of the earth, which obviously affects the ecological balance, has been increasing at an unusually high rate over the past 5 years.

The report of the President's Science Advisory Committee, released in 1965, finds that the extra heat due to fuel-produced carbon dioxide by the year 2000 may be sufficient to melt the Antarctic Ice Cap. There are conflicting reports, of course, regarding the time required for this phenomenon to occur, but in any event, this melting would raise the sea level by 400 feet. This would result in a catastrophe for much of the world's inhabited land and many of its major cities.

Further information regarding the environmental crisis can be obtained from a vast amount of printed material which is available on this subject. Some of the free pamphlets could be distributed at the general assembly.

The Department of Agriculture, Washington, D.C., has available a number of pamphlets that are pertinent to the environmental problem. Their titles are listed below.

Soil erosion
What is a watershed?
Trends in utilization of water
Necessary, convenient, commonplace water
Water supplies for homes in the country
Pollution - a growing problem of a growing nation
The water in the rivers and creeks
How water shaped the face of the land
Valley and hills, erosion and sedimentation
Treating waste waters for cities and industries
Planning for recreational use of water; a plan
Hauling down more water from the sky
Conversion of saline waters

The Department of the Interior, Washington, D.C., also has available a number of publications that would be useful sources for background information. They are:

Fact sheet on the land and water conservation fund
Primer on water
The Mississippi floods
Flood control and watershed development
Parks, recreation, and open space

The Congressional Record, available from the Superintendent of Documents, Washington, D.C., has a large number of articles dealing with this problem. Other magazines and publications that have published many articles dealing with environmental control are:

Saturday Review
Chemical and Engineering News
Science
Scientific American
Chemical Week
Bulletin of the Atomic Scientists
International Science and Technology
Industrial and Engineering Chemistry
Archives of Environmental Health
Chemical Abstracts
Atlantic Monthly
The Conservationist

SUPPLEMENTARY MATERIALS FOR SEMINAR ON
VENEREAL DISEASE

A number of pamphlets regarding venereal disease are available from the following sources:

American Medical Association, 535 N. Dearborn St., Chicago, Illinois 60610.

American Public Health Association, 1740 Broadway, New York, New York 10019.

American Social Health Association, 1740 Broadway, New York, New York 10019. 212-CI5-8000

U.S. Public Health Service, 330 Independence Ave., S.W., Washington, D.C. 20201. 202-963-1110

New York State Department of Health, Bureau of Epidemiology, 845 Central Ave., Albany, New York 12206. 518-457-7537

Several other good sources for background information on venereal diseases are listed below.

Deschin, D. C. Teenagers and venereal disease; a sociological study. New York. American Social Health Association. March 1961. Reprinted by the United States Department of Health, Education, and Welfare, Public Health Service, Communicable Disease Center, Venereal Disease Branch, Atlanta, Georgia. This center has a number of publications as well as color transparencies that are available.

Podair, S. Venereal disease: man against a plague. Palo Alto, California. Fearon. 1966.

Schwartz, W. S. Teacher's handbook on venereal disease. Education, N.E.A. Publications. 1965.

Three films that could be shown in the seminar on venereal disease are listed below.

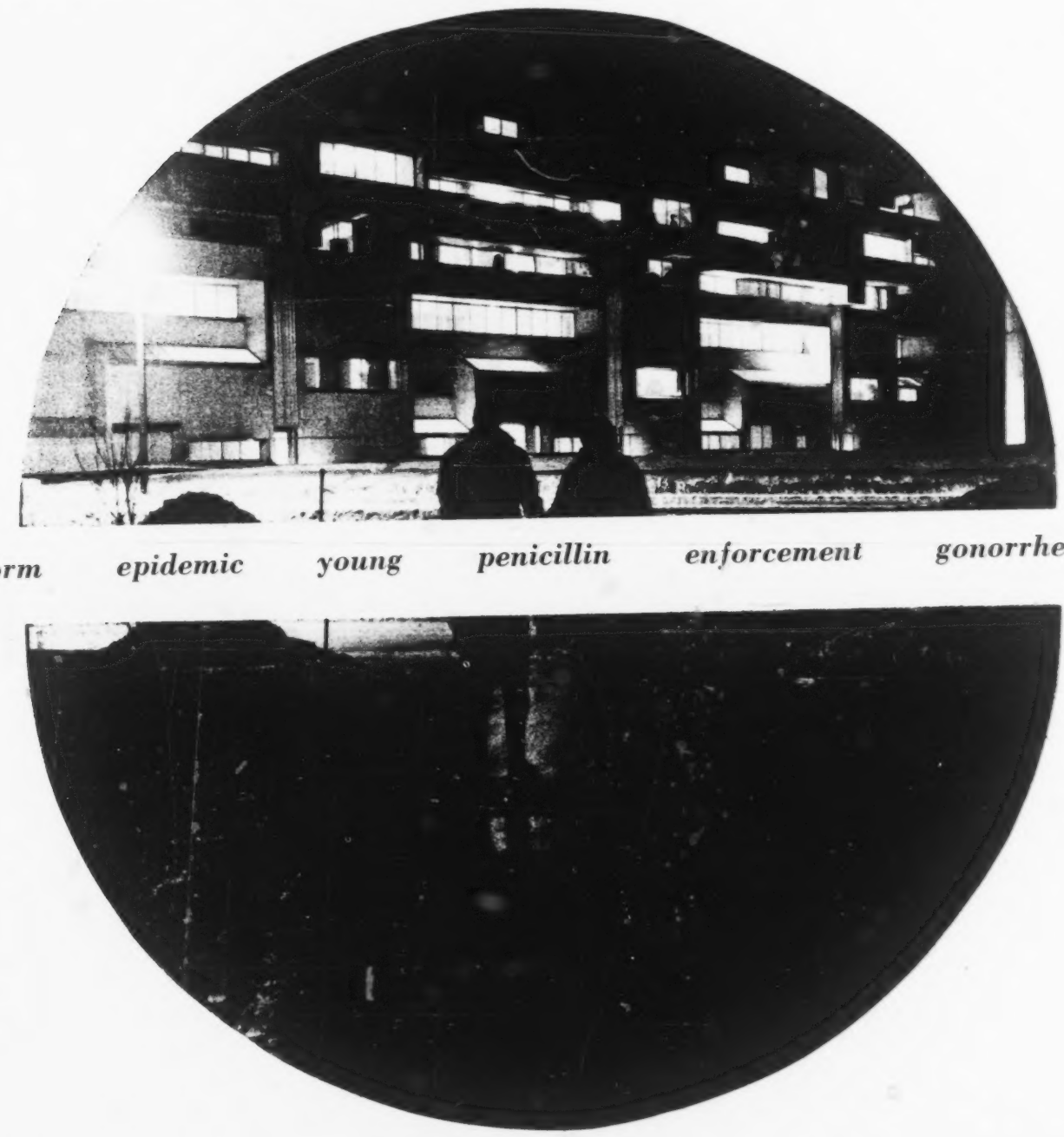
"A Quarter Million Teenagers" 16 minutes
Churchill Films
662 North Robinson Avenue
Los Angeles, California 90069

"How Do I Love Thee" 20 minutes
Brigham Young University
Provo, Utah 84601

"The Innocent Party" (Syphilis) 18 minutes
Calvin Company
1105 Truman Road
Kansas City, Missouri 64106

For any community program in the area of health, the Special Unit on Health and Drug Education, the State Education Department, Albany, New York 12224, will provide the following materials and/or services:

- curriculum materials
- multi-media resource lists
- personal consultation and advisory personnel
- evaluation of educational progress
- speakers or workshop leaders to assist in any school or community program



syphilis *inform* *epidemic* *young* *penicillin* *enforcement* *gonorrhea* *seminars*

SUPPLEMENTARY MATERIAL
FOR TRAINING MODERATORS

The success of the group discussions, and to a large extent the seminars themselves, will depend upon the ability of the moderators to maintain an atmosphere conducive to group interaction through constructive dialog. Therefore, the director of continuing education will find it profitable to review the following points during the inservice training of the moderators.

- Group discussion is not a debating society. The groups are not to argue for the fun of it. The issues are of great importance, and since even wise men disagree in their views, the objective is to find more truth than was brought to the group meeting. The members are in a cooperative quest, so their thinking should be creative rather than combative.

- When discussion wanders, restate the question and get a new start. Sometimes if the diversionary comment is especially important, ask the group, "Shall we follow this interesting issue that has come up or shall we return to the original discussion?"

- Encourage the participants to make short statements, not speeches.

- Trust the group. There is no member who is not superior to the next in at least one respect. The group as a whole can see further and more truly than its best member. Remember too that every member is an individual.

- Whenever the discussion on a major point is concluded, summarize it. Also summarize whenever the discussion has been fairly long and drawn out or confused, and shortly before the close of the session. Try to use the words of the members of the group instead of your own translation.

The following techniques refer to specific problem situations that may arise during group discussions and suggest strategies for preventing them from hindering the desired group interaction.

WHEN THE LEADER HEARS OR OBSERVES	*HE SEEKS TO*	*IN THESE TERMS*
Two or more ideas included in one contribution	*Distinguish between the two ideas*	*"Are there perhaps two ideas in what you have said, this..and this..? Do you agree? Does the group want to take them up one at a time?"*

From *Remedial reading* by Woolf, N. D. and Woolf, J. A. Copyright 1957. McGraw-Hill Book Company. Used with permission of McGraw-Hill Book Company.

WHEN THE LEADER HEARS OR OBSERVES	HE SEEKS TO	IN THESE TERMS
Some important ideas are not being contributed	*Encourage further exploration of the subject*	*"Have we covered the subject thoroughly? Are there other points which might be discussed? Is the group satisfied that all important ideas have been presented?"*
Signs of inattentiveness or boredom	*Stimulate interest or relieve fatigue*	*"Can we bring this down to our own experience? Could somebody give an example?" or "Maybe we are tired of this topic. Should we move on to another? What does the group want to do?"*
Information is lacking	*Have information introduced*	*"Is there someone in the group who can add to our information? Are there outside resources where more facts could be found? Would one of you volunteer to look this up?"*
Wasteful repetition	*Call attention to what has been accomplished and what is yet to be done*	*"Can a member (or the recorder) summarize what has been said? Have we covered the main points? Is it time to move on to the next point?"*
Significant agreement	*Call attention to it*	*"The group agreed that ...? Am I interpreting you correctly?"*
Significant disagreement	*Get the group opinion on the next move*	*"We seem to have a difference of opinion on this subject. One point of view is.... Shall we discuss this further, or record the disagreement and move on to another question?"*

WHEN THE LEADER HEARS OR OBSERVES	*HE SEEKS TO*	*IN THESE TERMS*
Signs of strong emotion	*Recognize it and prevent a breakdown in morale*	*"One or more members feel very strongly that...Others believe just as strongly that..."(Define feeling of disgust, excitement, hostility, etc.)*
Signs of domination	*Build up the confidence and ability of the group to resist domination*	*"Certainly every member's viewpoint counts in this discussion. Let's see what the rest think about it." Or "Miss B. has some information on this. Let's see what she thinks."*
Two or more people talking at once	*Make sure that everyone gets to talk and to hear*	*"We don't want to miss any of this. Could we have your comments one at a time?"*
Opinions presented as facts	*Distinguish between the two*	*"How do the rest of you feel about this? Do we have evidence to support this opinion?"*
Members treat the leader as an expert and appeal to his authority	*Involve the group*	*"Does anyone in the group have an answer for this question?"*
Any member nodding his head, sitting on the edge of his chair, etc.	*Give him a chance*	*"Mr. G. looks as if he has something to say. Can you help us, Mr. G.?"*
Noncontributing member	*Bring him into the group*	*"You are taking American history, aren't you, Mr. J.? Could you tell us where to find the answer to this question?"*

WHEN THE LEADER HEARS OR OBSERVES	HE SEEKS TO	IN THESE TERMS
Periods of silence	*Decide whether it is productive or non-productive*	*(Give them a few minutes to think things over) or "Have we run out of ammunition on this? What shall we do next?"*
Time is running short	*Remind the group*	*"We have five minutes left. What conclusions shall we report? Would you like to hear the notes of the recorder?"*

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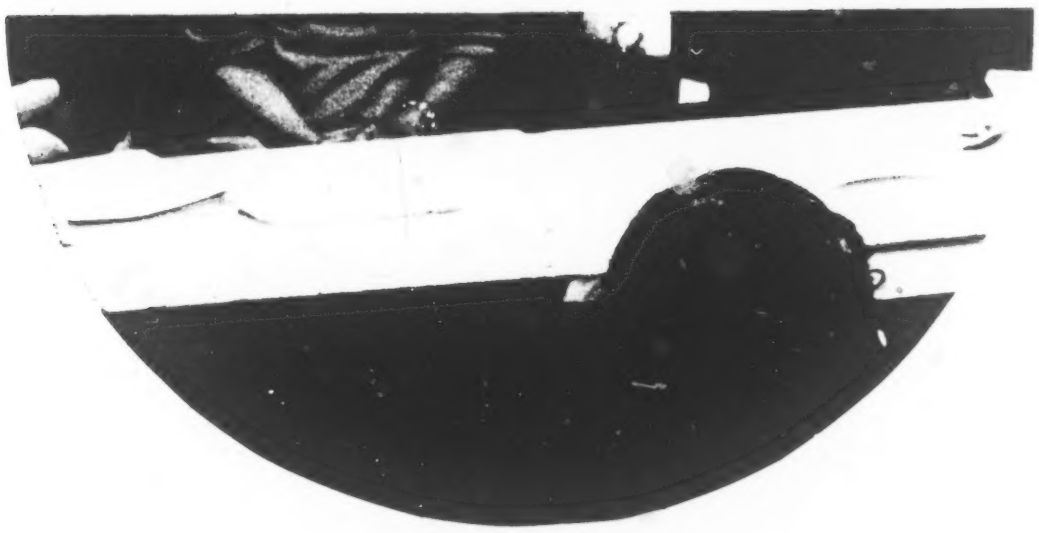

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